PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

appropriate. All further of andicated unless correcte maintenance fee notificat	d below or directed oth	ng the Patent, advance of the herwise in Block 1, by (orders and notification of materials and a new corres	on FEE (II require naintenance fees wil pondence address; a	I be mailed to the current and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
20995		lock 1 for any change of address) 7/2011 & REARIIP	Fee(s) Transmittal. This rs. Each additional p its own certificate o	certificate cannot be used:	or domestic mailings of the for any other accompanying ent or formal drawing, must smission	
2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	F	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/554,075 09/06/2006		Marco Mario Tivelli			TAMSA.001APC		
THEREOF			TENDED TO BE USED			- -	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I			
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/27/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
SHEVIN, MARK L		1733	148-335000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			(I) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be THE PATENT (print or typ	2. For printing on the patent front page, list (I) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. E PATENT (print or type) ta will appear on the patent. If an assignee is identified below, the document has been filed for			
recordation as set forth	n in 37 CFR 3.11. Comp	pletion of this form is NO	T a substitute for filing an a	issignment.		ocument has been filed for	
(A) NAME OF ASSIC	ERO DE MEXICO	C A	(B) RESIDENCE: (CITY and STATE OR COUNTRY) MEXICO				
DALMINE S.P.		5.A.	ITALY				
		categories (will not be p	_	Individual Corr	poration or other private gr	oup entity 🖵 Government	
a. The following fee(s) are submitted: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the particular overpayment, to Deposit Account Number 11-1410 (enclose an extra copy of this form).				
	us (from status indicated S SMALL ENTITY statu				ENTITY status. See 37 C		
NOTE: The Issue Fee and nterest as shown by the re	l Publication Fee (if requeeords of the United Sta	uired) will not be accepte ites Patent and Trademarl	ed from anyone other than the k Office.	ne applicant; a regist	ered attorney or agent; or t	he assignee or other party in	
Authorized Signature	/Todd D. Reyn	olds/		Date July _	13, 2011		
Typed or printed name	Todd D. Reyn	olds		Registration No.	63,980		
n application. Confident	iality is governed by 35 Lapplication form to the	U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or re 1.14. This collection is estive depending upon the indivi- tion of the contraction of the contra	mated to take 12 mi	inutes to complete, including the second control of the second con	ng gathering, preparing, and me you require to complete	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.